

Parks and Recreation Department 3300 Capitol Avenue, Bldg. B, P.O. Box 5006 Fremont CA 94537-5006

Phone: (510) 494-4300 www.fremont.gov

For Office Use Only

Recreation Application for Part-Time Temporary Employment

- An electronic version of this form is available on the City's website. Once you have completed the form, you can mail it to Parks and Recreation at the address above. Otherwise, please print clearly using black or blue ink.
- Check the job announcement to see if a resume or a supplemental questionnaire is required.
- Notify the Parks and Recreation Department, if you require reasonable accommodation in the testing process.
- If you have difficulty completing this application, please contact the Parks and Recreation Department.

POSITION DESIFED (A separate application is required for each position. Photocopies are acceptable.)					
Position Desired (give exact title):					
List all positions you are applying for concurrently:					
Personal Information (Please notify us of any change of address or phone number.)					
Last Name: First Name:					
Street Address: Apt. No.:					
City: State/Zip:					
Home Phone: () Alternate Phone: () Work Phone: ()					
Email Address:					
Do you currently possess a valid CA Driver's License? No Class:					
Do you meet the minimum age requirement as indicated on the job announcement? Yes No					
If hired, can you provide evidence of your legal right to work in the USA? Yes No					
Do you have any relatives employed by the City of Fremont? Yes No					
Have you ever previously applied for work with, or been employed by, the City of Fremont? \[\subseteq \text{Yes} \subseteq \text{No} \]					
If yes, when and for/in what position?					
Are you able to perform the essential functions of the job for which you are applying, either with or without accommodation? Yes No If no, please describe the functions which you cannot perform:					
The City of Fremont complies with the Fair Employment and Housing Act (FEHA) and all other disability laws. We will consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions, unless accommodation would cause undue hardship.					
Hours Sun Mon Tue Wed Thur Fri Sat Seasonal					
Available Year Around					
Education & Training					
Education: Circle highest grade completed or will complete in next 4 months: 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20					
Name of School Location Did you graduate?					
High School: ☐ Yes ☐ No ☐ GED or equivalent					
Name of School Location Degree/Major Units Completed					
College/University:					
Trade/Business School:					

Name of Applicant:		Position Desired:	
Qualifications, Skills, Cert	tificates & Licenses (Att	tach additional pages, if ne	eded)
Describe your experience in working or recreational setting (i.e., Community Comprograms, Social Clubs, etc.).	5 5 .	Describe fully any job-re certificates or licenses yo	lated skills, knowledge, special training, ou may possess.
Do you have any foreign language skil If yes, indicate what language(s), and			
Software Applications:			Typing WPM:
List any award(s), publication(s), quali	fications for the position, etc. whi	ch are not listed in anothe	area of the application.
Experience			
List your most recent experience first	or promotion separately. Attach a	dditional pages if needed.	ling U.S. Military Service and/or volunteer You may attach your resume or job-related
Name of Employer:		Job Title:	
Supervisor's Name:		Supervisor's Phone: ()
Street Address:		City:	State/Zip:
From (Mo./Yr.):	To (Mo./Yr.):	Hours per week:	Salary:
Duties Performed:			
Reason for Leaving:			
Experience (continued)			
Name of Employer:		Job Title:	
Supervisor's Name:		Supervisor's Phone: ()
Street Address:		City:	State/Zip:
From (Mo./Yr.):	To (Mo./Yr.):	Hours per week:	Salary:
Duties Performed:			
Reason for Leaving:			

Name of Applicant:	Position Desired:	
Experience (continued)		
Name of Employer:	Job Title:	
Supervisor's Name:	Supervisor's Phone: ()	
Street Address:	City:	State/Zip:
From (Mo./Yr.): To (Mo./Yr.):	Hours per week:	Salary:
Duties Performed:		
Reason for Leaving:		
Experience (continued)		
Name of Employer:	Job Title:	
Supervisor's Name:	Supervisor's Phone: ()	
Street Address:	City:	State/Zip:
From (Mo./Yr.): To (Mo./Yr.):	Hours per week:	Salary:
Duties Performed:		
Reason for Leaving:		
Experience (continued)		
Name of Employer:	Job Title:	
Supervisor's Name:	Supervisor's Phone: ()	
Street Address:	City:	State/Zip:
From (Mo./Yr.): To (Mo./Yr.): Duties Performed:	Hours per week:	Salary:
Duties Performed:		
Reason for Leaving:		
Reason for Leaving:		

Name of Applicant:	Position Desired:
May we contact your present employer regarding your qualifications ar	d work record? Yes No
May we contact your past employers regarding your qualifications and	work record?
Have you ever been terminated, other than layoff, or forced to resign of If so, please give name of employer, dates of employment and reasons	or rejected during probation from employment within the last 10 years? selow. If no, indicate "not applicable."
Conviction	
Have you ever been convicted of a felony or misdemeanor? A "convict a court imposed a sentence. You may exclude any conviction for marisince age 18, excluding minor traffic violations and convictions that has automatically disqualify you. The nature of the offense, the date of the offense to the position sought may be considered. If not, indicate "not indicate "no	uana-related offenses, if over two years old. Please list all convictions we been sealed, expunged, or eradicated. Convictions do not e offense, the surrounding circumstances, and the relevance of the
Agreement	
Agreement of Applicant: I certify that the statements in this application best of my knowledge, and understand that misrepresentation or delibusgree to be fingerprinted, to sign an oath of office, and to furnish processing the processing of the statement of the processing of the statement of th	erate omission of fact may subject me to disqualification or dismissal. I
may be required as a condition of employmenta	
Signature	
Signature	
Signature Submit your comp	Date leted application to: ol Avenue ● Building B ● P.O. Box 5006 ● Fremont, CA 94537-5006
Signature Submit your comp Parks and Recreation Department ● City of Fremont ● 3300 Capito	eted application to:
Signature Submit your comp Parks and Recreation Department • City of Fremont • 3300 Capito Recruitment Questionnaire	eted application to:
Signature Submit your comp Parks and Recreation Department ● City of Fremont ● 3300 Capito	eted application to:
Signature Submit your comp Parks and Recreation Department • City of Fremont • 3300 Capito Recruitment Questionnaire	eted application to:

B	D
POSITION	Desired

Employment Questionnaire

Please respond to the following questions and submit this form with your application packet. The completed form is confidential and will be detached from your application. This information is voluntary and is gathered in accordance with State and Federal laws.

Check one:
☐ Female
☐ Male
Check one:
 American Indian or Alaskan Native – All persons having origins in any of the original peoples of North and South America (including Central America) and who maintain cultural identification through tribal affiliation or community recognition. Tribal affiliation:
Asian – All persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, Thailand, and Vietnam.
Black – When not of Hispanic origin, all persons having origins in any of the Black racial groups of Africa.
Filipino – All persons having origins in any of the original peoples of the Philippine Islands.
Hawaiian Native or Other Pacific Islander – All persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
Hispanic – All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.
White – When not of Hispanic origin, all persons having origins in any of the original peoples of Europe, the Middle East or North Africa.
Other (specify):